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CONFIRMATION NO. 4202

<b>SERIAL NUMBER</b> 10/716,005	<b>FILING OR 371(c) DATE</b> 11/18/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1634	<b>ATTORNEY DOCKET NO.</b> 07039-460001
<b>APPLICANTS</b> James R. Uhl, Rochester, MN; Franklin R. Cockerill III, Rochester, MN; Christian Aichinger, Munchen, DE; Astrid Reiser, Antdorf, GERMANY;				
<b>** CONTINUING DATA *****</b> <i>none</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>none</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 02/23/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>allowance</i> Examiner's Signature <i>Johanne Sittler</i> Initials <i>JS</i>		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 36
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 26191				
<b>TITLE</b> Detection of group B streptococcus				
<b>FILING FEE RECEIVED</b> 1274	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	